

HA-04-022C

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-3055 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

300155126 *KP*

Building Address 116362 Newport Rd  
111 Arroyo MD 21771  
Suite/Apt. #: 04-318137 SDP/W/P/Petition #: \_\_\_\_\_  
Census Tract 6004001 Subdivision \_\_\_\_\_  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
Tax Map 2 Parcel 29 Grid 17  
Zoning RC-PED Map Coordinates 365 Lot size 31.36 ac

Property Owner's Name Sharon & Kathy Conley  
Address 116362 Newport Rd  
City 111 Arroyo State MD Zip Code 21771  
Home Phone 301-854-5777 Work Phone 301-721-2106  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Single family farm  
Proposed Use 3 bdrms w/ tenant home  
Estimated Construction Cost \$ 50,000  
Description of Work Single story farm  
Tenant House 1 story  
1 bedroom 1 bath *family room kitchen*  
unfinished basement w/ rough-in

Contractor Company home owner  
Contact Person Sharon or Kathy Conley  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
License No. \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant owner  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

**Building Characteristics**  
Height: \_\_\_\_\_  
No. of stories: \_\_\_\_\_  
Gross area, sq. ft. per floor: \_\_\_\_\_  
Use group: \_\_\_\_\_  
Construction type:  
 Reinforced Concrete  
 Structural Steel  
 Masonry  
 Wood Frame  
 State Certified Modular

**Utilities**  
Water Supply:  
 Public  
 Private  
Sewage Disposal:  
 Public  
 Private  
Electric Yes  No   
Gas Yes  No   
Heating System:  
Electric  Oil   
Natural Gas   
Propane Gas   
Sprinkler system: N/A   
 Full  
 Partial  
 Other Suppression  
# of Heads \_\_\_\_\_

**Building Characteristics**  
SF Dwelling  SF Townhouse   
Depth Width  
1st floor: 34' 28'  
2nd floor: \_\_\_\_\_  
Basement: 34' 28'  
Finished Basement  Unfinished Basement   
Crawl space  Slab on Grade   
No. of Bedrooms 1  
Height: \_\_\_\_\_  
Multi-family dwellings:  
No. of efficiency units: \_\_\_\_\_  
No. of 1 BR units: \_\_\_\_\_  
No. of 2 BR units: \_\_\_\_\_  
No. of 3 BR units: \_\_\_\_\_  
Other Structure: \_\_\_\_\_  
Dimensions: \_\_\_\_\_  
Footings: \_\_\_\_\_  
Roof Height: \_\_\_\_\_  
 State Certified Modular  
 Manufactured Home

**Utilities**  
Water Supply:  
 Public  
 Private  
Sewage Disposal:  
 Public  
 Private  
Electric Yes  No   
Gas Yes  No   
Heating System:  
Electric  Oil   
Natural Gas   
Propane Gas   
Sprinkler system: N/A   
 NFPA #13D  
 NFPA #13R  
 Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Kathy J. Conley  
Applicant's Signature  
Title/Company \_\_\_\_\_

Kathy L. Conley  
Print Name  
7/25/05  
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Front:			Filing fee	\$ <u>25</u>
Rear:			Permit fee	\$ _____
Side:			Excise tax	\$ _____
Side St:			Add'l per. fee	\$ _____
All minimum setbacks met?			TOTAL FEES	\$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			Sub-total paid	\$ _____
Is Entrance Permit required?			Balance due	\$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			Check	\$ <u>3070</u>
Historic District?			Validation	\$ <u>94590</u>
YES <input type="checkbox"/> NO <input type="checkbox"/>				
Lot Coverage for New/Town Zone				
SDP/Red-line approval date			Accepted by	

47291

# HOWARD COUNTY PERMIT APPLICATION

**PERMIT NUMBER**  
B-00125613

Building Address 16362 Newport Rd.  
Mt. Airy MD 21771

Suite/Apt. #: N/A SDP/WP/Petition #: N/A

Census Tract 0090 Subdivision N/A

Section N/A Area N/A Lot N/A

Tax Map 2 Parcel 29 Grid 17

Zoning RC R24 Map Coordinates 365 Lot size \_\_\_\_\_

Property Owner's Name Sharon + Kathy Conley

Address 16362 Newport Rd.

City Mt. Airy State MD Zip Code 21771

Home Phone 301-554-5279 Work Phone 301-540-9090

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Single family home

Proposed Use Same with addition

Estimated Construction Cost \$ 30,000

Description of Work 2 story addition, unfinished basement, family room, 4 bedrooms, 2 baths

Contractor Company owner

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

License No. \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant owner

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Depth _____ Width _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Kathy L. Conley  
 Applicant's Signature  
owner  
 Title/Company

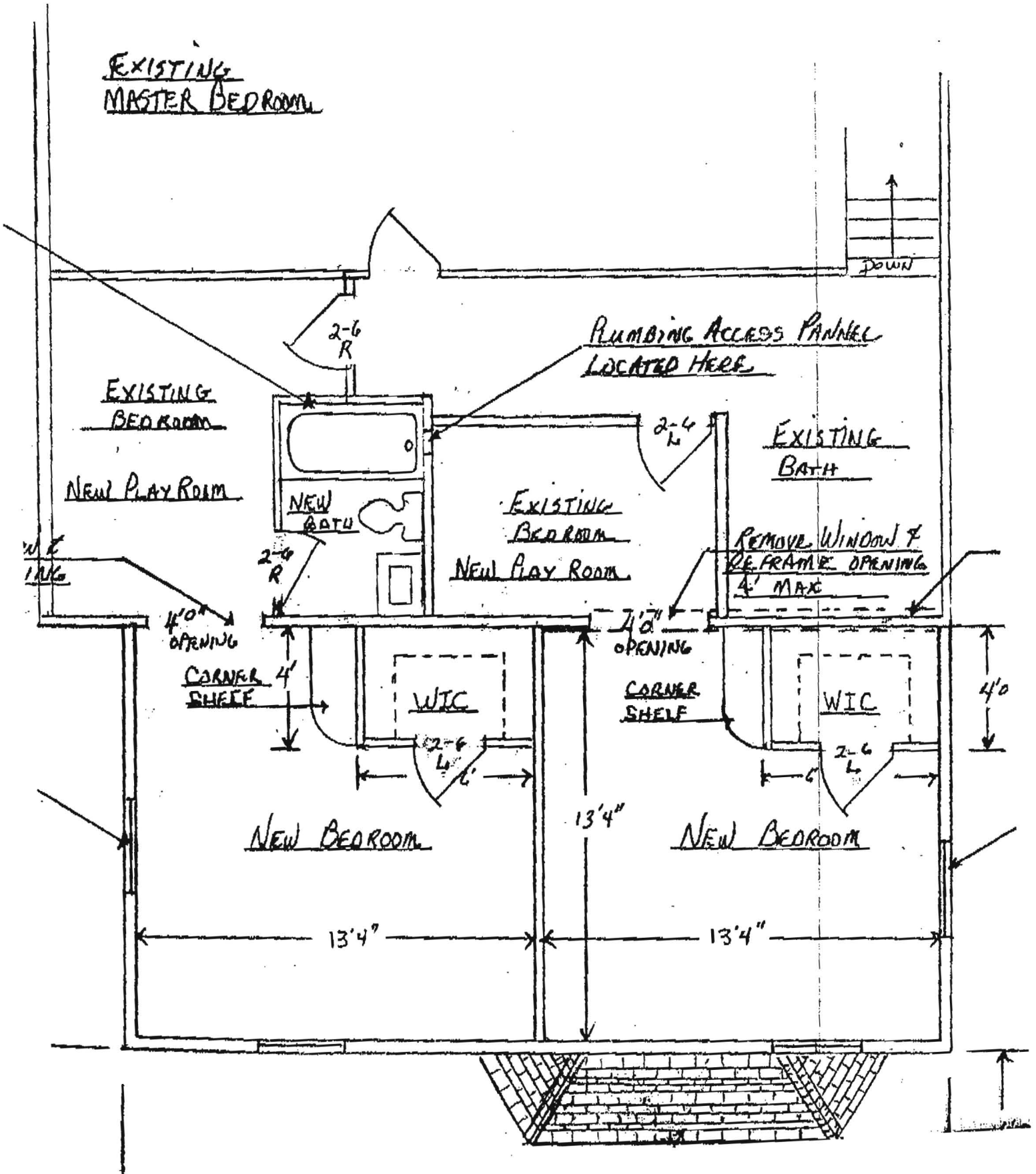
Kathy L. Conley  
 Print Name  
7/24/00  
 Date

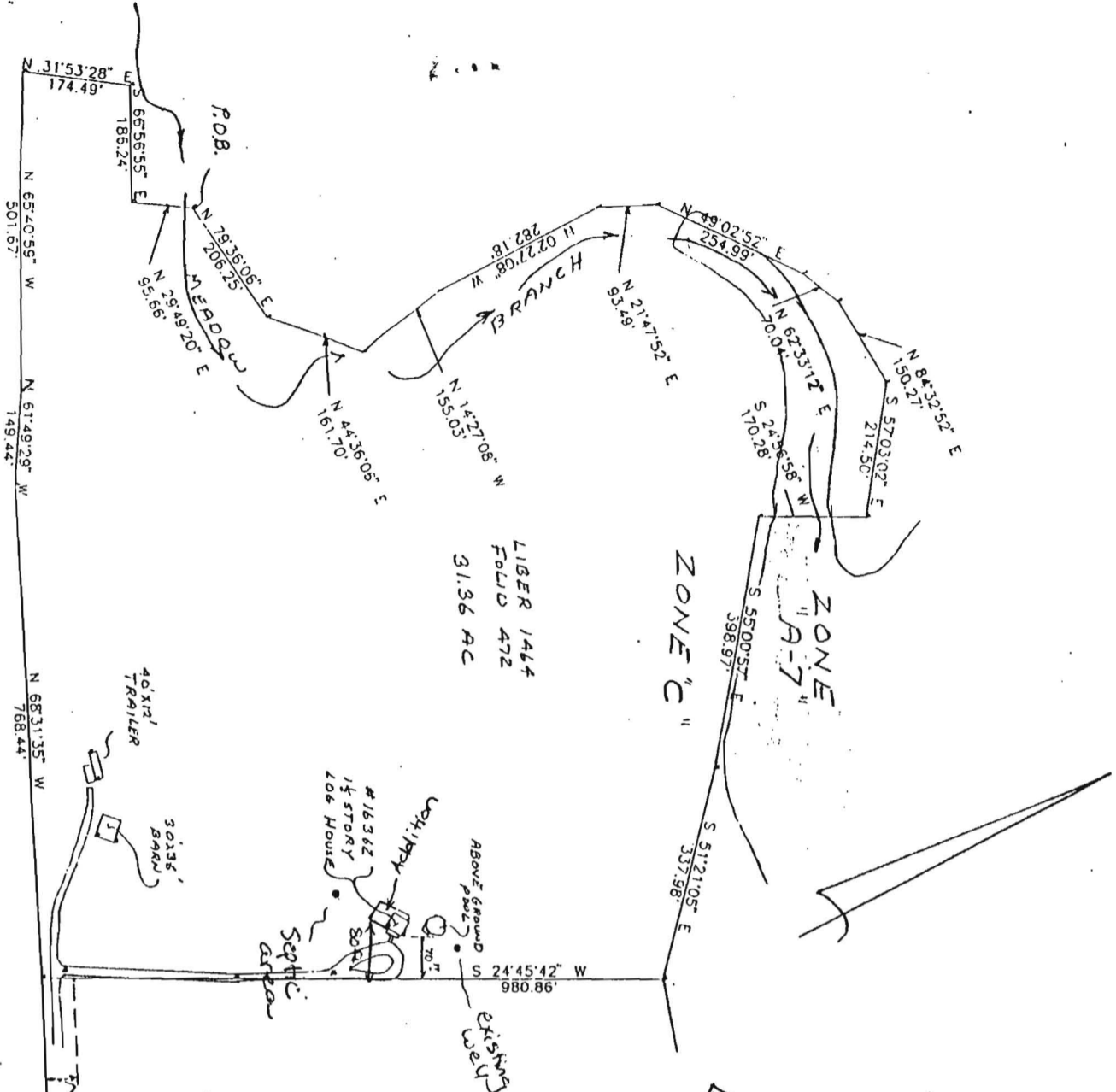
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION
Land Development, DPZ			Front: _____
State Highways			Rear: _____
Building Official			Side: _____
Dev. Engineering, DPZ			Side St.: _____
Health	<u>8/4/00</u>	<u>Mark R. [Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____ Accepted by <u>[Signature]</u>

PROPERTY ID # <u>47291</u>	AMOUNT
Filing fee	\$ <u>25.00</u>
Permit fee	\$ _____
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ _____
Balance due	\$ _____
Check	# <u>3839</u>
Validation	# <u>32665</u>

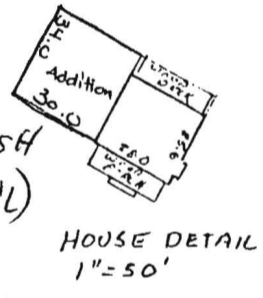
# 300155131





7/28/00 #1  
 MR

50' R/W TO a  
 16.5' R/W TO OLD FREDERICK ROAD  
 LARGE 4 BR ADD'N TO EX. 3 BR  
 HOUSE; RE-PERC REQ'D TO ESTABLISH  
 SUFF. SEPTIC RESERVE (~7000' ADD'L)  
 AREA, TOTAL ~17000' REQ'D;  
 SATISFACTORY  
 DISTANCE FROM S.T. TO ADD'N  
 TO BE VERIFIED



NO B.P. FOR POOL ON FILE

7/28/00 #2 T/C W/OWNER: EX. HOUSE ACTUALLY CONTAINS  
 1 BR, 4 BR EXPANSION WOULD ⇒ 5 BR, WHICH WOULD REQUIRE  
 2 BR S.S. EXPANSION + SLIGHTLY MORE RESERVE AREA

8/3/00 T/C W/OWNER - WINDOW SERVING AS EGRESS TO EX. LOFT/BR  
 TO BE ELIMINATED; EXPANDED HOUSE = 4 BR.  
 OK TO RELEASE BP UPON PAYMENT OF \$25 REPAIR FEE.

Subject property is shown in Zone A-7-C  
 on the National Flood Insurance Program  
 Flood Insurance Rate Map of HOWARD  
 County, Maryland, Panel # 240074  
 Community Panel # 240074  
 Effective Date: DEC 4 1986

This is to certify that I have surveyed the  
 property shown hereon, being the same property  
 described in a deed from DONALD G. HOOVER & WIFE  
 TO RONALD G. HOOVER & TERRY L. HOOVER  
 and recorded among the land records of HOWARD  
 COUNTY in Liber 1464 Folio 472 for the  
 purpose of locating the improvements thereon.



LOCATION SURVEY  
 16362 NEWPORT ROAD  
 4TH ELECTION DISTRICT  
 HOWARD COUNTY MD

NTT ASSOCIATES, INC.  
 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771  
 Phone 442-2031

Scale 1"=200' X.77  
 Date 4-14-93  
 Field By JCH  
 Drawn By JCH  
 Drawing # X17256

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE  
 CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS  
 NOT TO BE USED TO ESTABLISH PROPERTY LINES.

J. Carl Hudgins PLS#96

nawn & Kathy Contey  
6362 Newport Road  
ft. Airy, MD 21771  
01-854-5279.  
-mail: [skfarm@juno.com](mailto:skfarm@juno.com)

Tax Map - 2  
Grid - 17  
Parcel - 29  
Election district - 4  
zoning - RC

146A

472

AC

= 40'

S 24°45'42" W  
980.86'

#16362  
1 1/2 STORY  
LOG HOUSE  
(existing) with a 30' x 34' addition

This has been removed  
40' x 12' TRAILER  
well + septic

30' x 36' BARN  
(existing)

New septic field

Proposed Farm Tenant House  
~28' x 34'  
one story

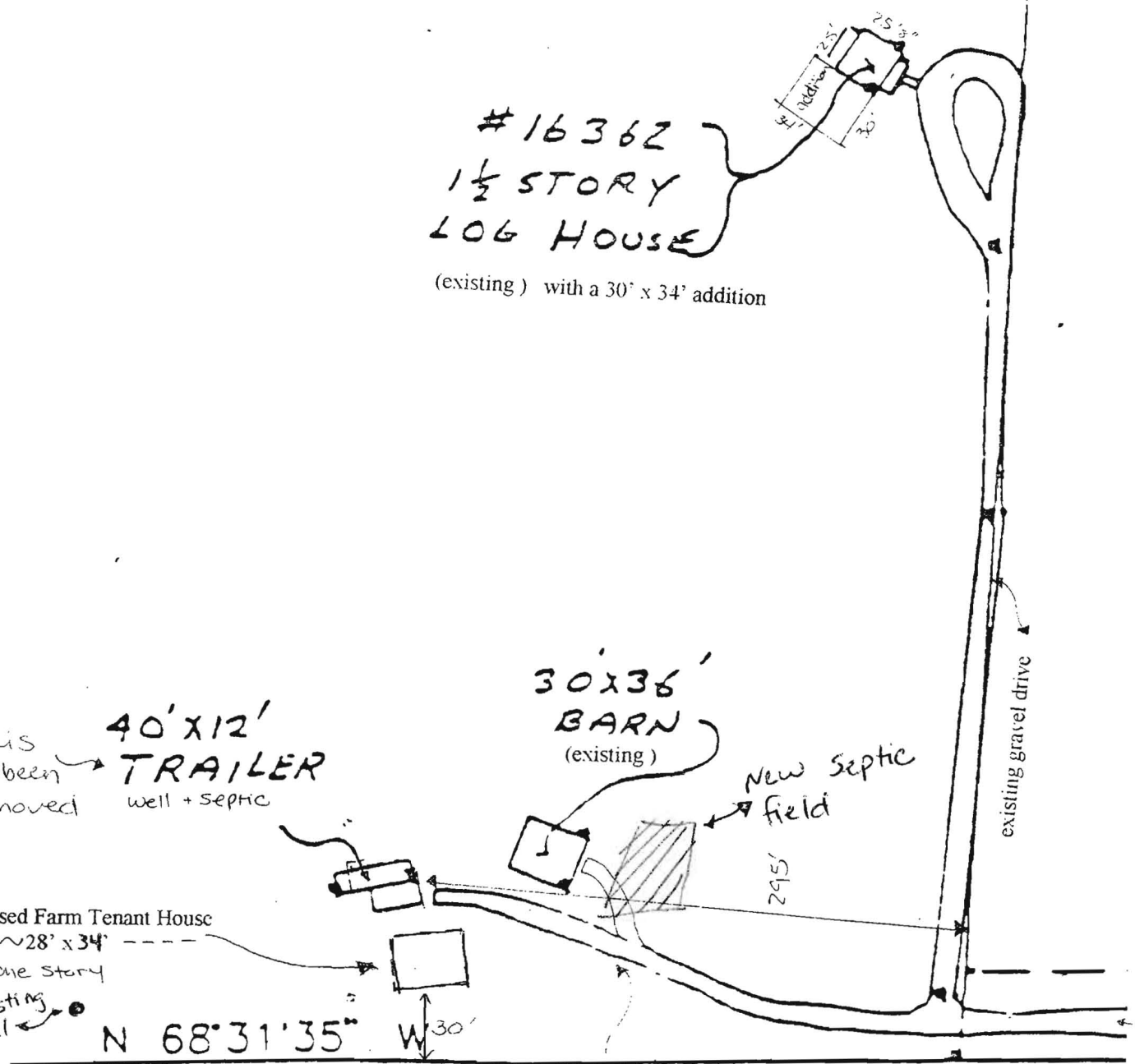
Existing well

N 68°31'35" W 30'  
768.44'

existing gravel drive

existing gravel drive

change in property

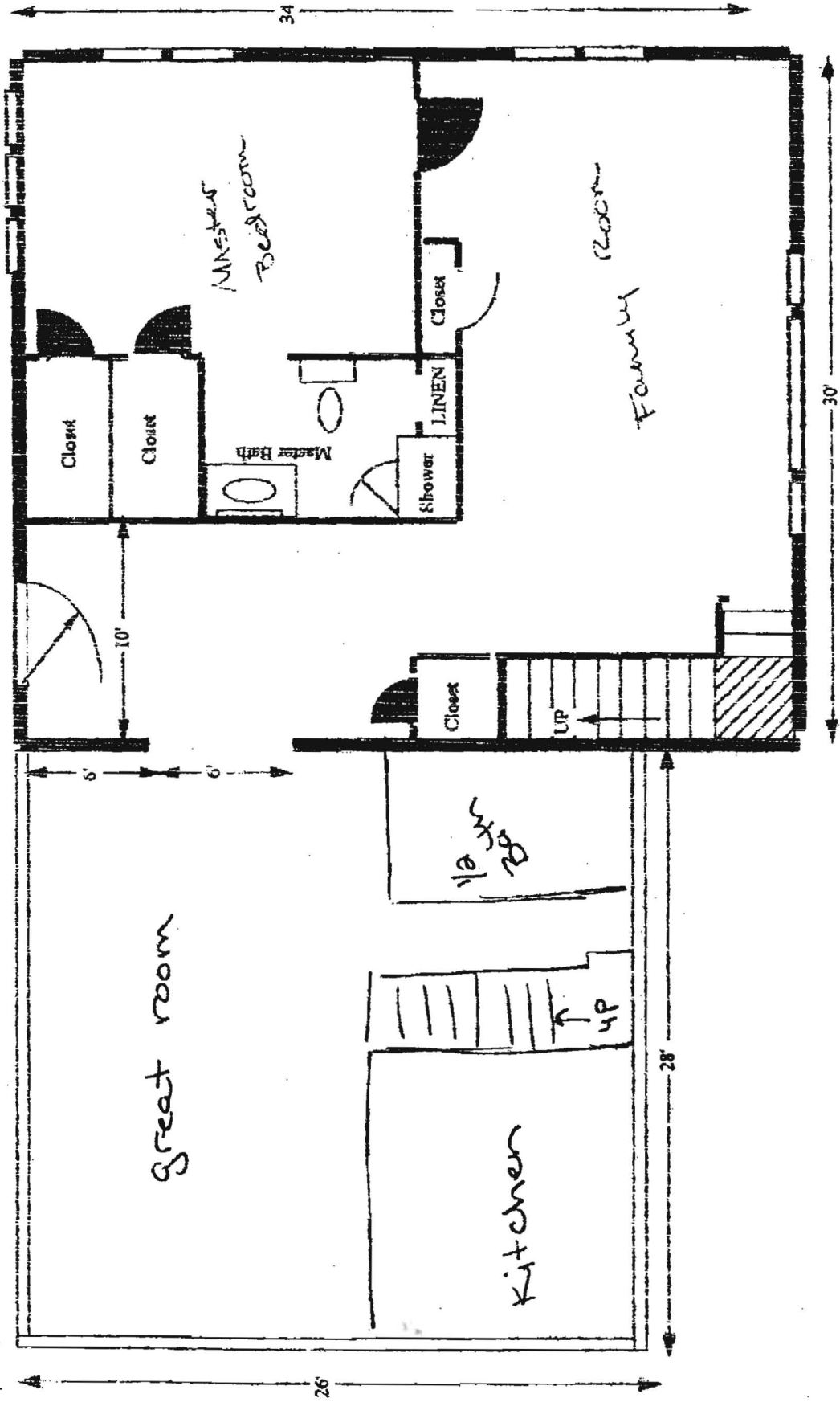


First Floor

existing house

addition

Front Porch



Back Porch

Shawn R & Kathy L Conley  
16362 Newport Rd  
Mount Airy MD 21771-3428



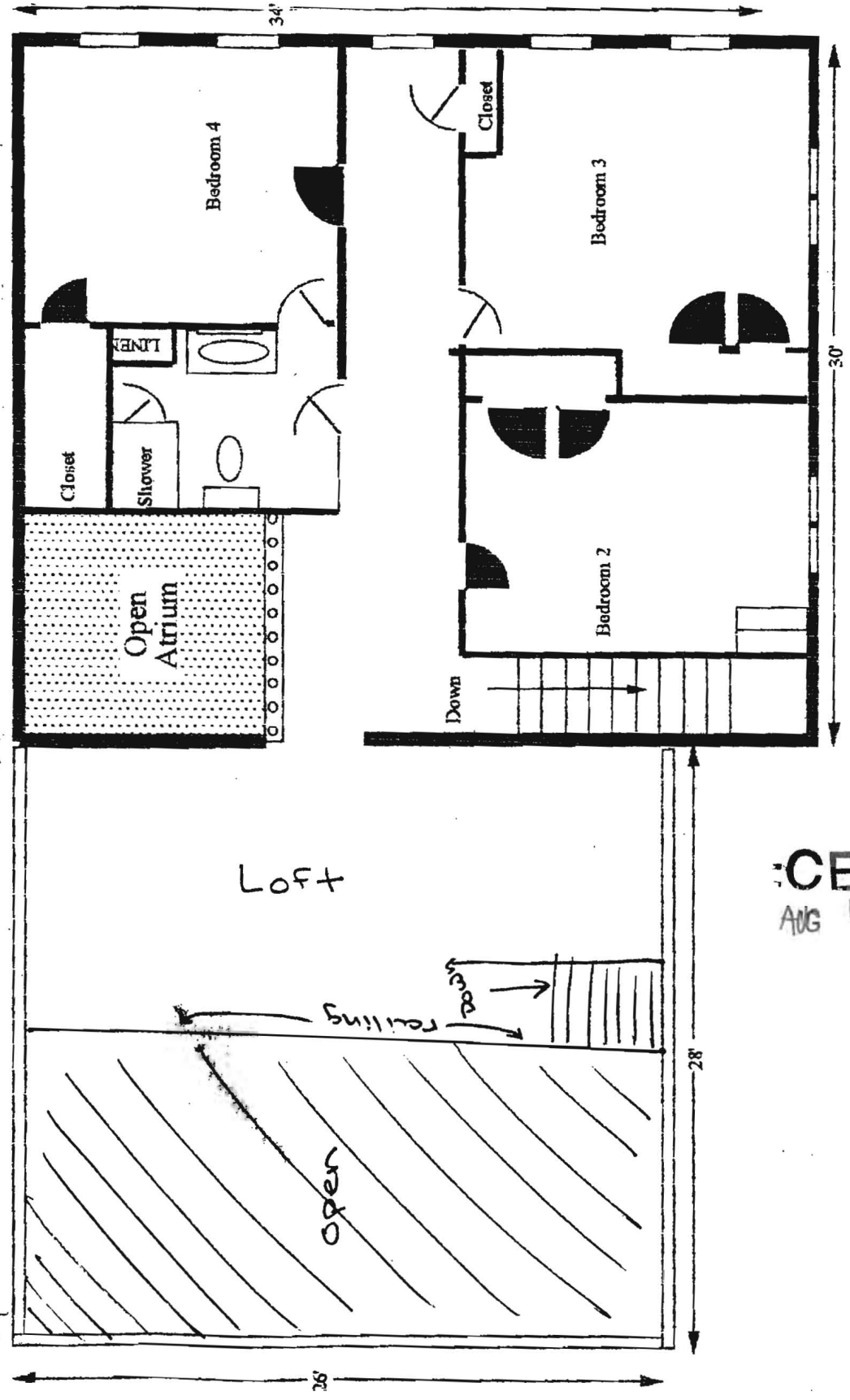
front of house

rear of house

2nd floor

addition

existing house



CEIVI  
AUG 4 2000

**Kathy Conley**  
 16862 Newport Rd.  
 Mount Airy, MD 21771-3428

